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NOV 1 5 2004

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08/10/2004

**ROPES & GRAY LLP** ONE INTERNATIONAL PLACE BOSTON, MA 02110-2624

11/16/2004 MBEYENE2 00000024 181945 09687652

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Paula Depelteau	(Depositor's name)
	(Signature)
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1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
•	09/687,652	10/13/2000	Hai U. Wang	CTCH-P03-006	6630

TITLE OF INVENTION: ARTERY-AND VEIN-SPECIFIC PROTEINS AND USES THEREFOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	# \$1336 # 137	0	\$0	\$1330 \$1370	11/10/2004
EXA	MINER	ART UN	IT	CLASS-SUBCLASS		
ANDRES	S, JANET L	1646		514-350000	•	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the ror agent (2) the registere 2 register	rinting on the patent front page, I mames of up to 3 registered pates OR, alternatively, name of a single firm (having as ad attorney or agent) and the name of patent attorneys or agents. If o name will be printed.	a member a 2	s & Gray LLP	
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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

California Institute of Technology

Pasadena, CA

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The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-1945 (enclose an extra copy of this form).				
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	□ A check in the amou □ Payment by credit ca ☑ The Director is here Deposit Account Numb □ b. Applicant is not cl dication Fee (if any) or to re- peted from anyone other than ark Office.	4b. Payment of Fee(s):  A check in the amount of the fee(s)  Payment by credit card. Form PTO-  The Director is hereby authorized Deposit Account Number 18-19  b. Applicant is not claiming SMAL dication Fee (if any) or to re-apply any presented from anyone other than the applicant; nark Office.	4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any Deposit Account Number 18-19 45 (enclose an extra copy of this  b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2) dication Fee (if any) or to re-apply any previously paid issue fee to the application identificanted from anyone other than the applicant: a registered attorney or agent; or the assignee	

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